			٠		10/617991									
									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD														
Effective January 1, 2003 10617991														
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN														
r	<u> </u>	<u></u>	(Column	1)	(Column 2)		TY	TYPE		OR	SMALL	ENTITY		
TOTAL CLAIMS			14					ATE	FEĘ]	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		ВА	BASIC FEE 375.0		OR	BASIC FEE	750.00		
TOTAL CHARGEABLE CLAIMS			14 minus 20=		*	Ø		X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			4 minus 3 =		<u> </u>	c'		42 =	42	OR	X84=			
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT						100	1	.000			
* If the difference in column 1 is less than zero, enter "0" in column 2						<u> </u>	140=		OR	+280=				
andt. filled 1/20/04 1/2											,			
	C	LAIMS AS A (Column 1)	MENDED - PART II // 5 (Column 2) (Column 3)			s	MALL	ENTITY	OR	OTHER SMALL				
A		CLAIMS REMAINING		HIGH	EST		וֹ רֹ		ADDI-			ADDI-		
Į		AFTER AMENDMENT		PREVIO	DUSLY	PRESENT EXTRA	F	RATE	TIONAL FEE		RATE	TIONAL FEE		
AMENDMENT	Total	+ 17	Minus	** >	D	=	1 5	\$ 9=	1-1-1	00	X\$18=	1		
AEN.	Independent	2	Minus	*** (Ť	=	1 -			OR		-		
Ą	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		1	(42=	ļ <u>.</u>	OR	X84=			
							- +	140=		OR	+280=			
ŀ								TOTAL IT. FEE		OR	TOTAL ADDIT. FEE			
		(Column 1)	· · · · · · · · · · · · · · · · · · ·	(Colur		(Column 3)				_				
AMENDMENT B		CLAIMS REMAINING		HIGH NUM	BER	PRESENT			ADDI-	1	5475	ADDI-		
		AFTER AMENDMENT		PREVIO PAID		EXTRA	RATE		TIONAL FEE		RATE	TIONAL FEE		
	Total	*	Minus	**		=] >	\$ 9=		OR	X\$18=			
	Independent	*	Minus	***		= .] [;	(42=		OR	X84=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┛┞	4.40						
							Ľ	140= TOTAL		OR:	+280= TOTAL			
			ADE	IT. FEE		OR	ADDIT. FEE	L						
	(Column 1) (Column 2) (Column 3)													
AMENDMENT C		REMAINING AFTER		NUM PREVIO	BER	PRESENT EXTRA		ATE	ADDI- TIONAL		RATE	ADDI- ` TIONAL		
		AMENDMENT		PAID		EATRA	ĮĽ	<u> ۲</u>	FEE		10012	FEE		
	Total	*	Minus	##		=] ×	\$ 9=		OR	X\$18=			
	Independent	*	Minus	***	r 01 4	=	1 ,	42=		OR	X84=			
		NTATION OF MI	OLTIPLE DEF	LNDEN	CLAIM		1 -	140=			. 000			
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 										OR	+280=			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20," Apply 555												L		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														